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PTO/SB/21(08-00)

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2814

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

8

Application Number

09/617,858

Filing Date

JULY 17, 2000

First Named Inventor

O'REGAN ET AL.

Group Art Unit

2814

Examiner Name

W. LOUIE

Attorney Docket Number

UA0026 US NA

ENCLOSURES (check all that apply)

Fee Transmittal Form

Fee Attached

Amendment / Response

After Final

Affidavits/declaration(s)

Extension of Time Request

Express Abandonment Request

Information Disclosure Statement

Certified Copy of Priority Document(s)

Response to Missing Parts/ Incomplete Application

Response to Missing Parts under 37 CFR 1.52 or 1.53

Assignment Papers
(for an Application)

Drawing(s)

Licensing-related Papers

Petition

Petition to Convert to a Provisional Application

Power of Attorney, Revocation Change of Correspondence Address

Terminal Disclaimer

Request for Refund

CD, Number of CD(s)

After Allowance Communication to Group

Appeal Communication to Board of Appeals and Interferences

Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)

Proprietary Information

Status Letter

Other Enclosure(s) (please identify below):

Remarks

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm
or
Individual name

CHEN WANG

Signature

Date

FEBRUARY 25, 2002

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: FEBRUARY 25, 2002

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**OPY OF PAPERS
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**OICE TRANSMITTAL
for FY 2002**

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$ 400)

Complete if Known

Application Number	08/617,858
Filing Date	JULY 17, 2000
First Named Inventor	O'REGAN ET AL.
Examiner Name	W. LOUIE
Group / Art Unit	2814
Attorney Docket No.	UA0026 US NA

METHOD OF PAYMENT (check all that apply)					FEE CALCULATION (continued)				
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number 04-1928 Deposit Account Name E. I. du Pont de Nemours and Company									
The Commissioner is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account									
FEE CALCULATION									
1. BASIC FILING FEE									
Large Entity		Small Entity		Fee Description				Fee Paid	
Fee Code	Fee (\$)	Fee Code	Fee (\$)						
101	740	201	370	Utility filing fee					
106	330	206	165	Design filing fee					
107	510	207	255	Plant filing fee					
108	740	208	370	Reissue filing fee					
114	160	214	80	Provisional filing fee					
SUBTOTAL (1)				(\$ 0)					
2. EXTRA CLAIM FEES									
Total Claims		Extra Claims		Fee from below		Fee Paid			
Independent Claims		-20		= 0		X 18		= 0	
Multiple Dependent		-3		= 0		X 84		= 0	
Large Entity		Small Entity		Fee Description				Fee Paid	
Fee Code	Fee (\$)	Fee Code	Fee (\$)						
103	18	203	9	Claims in excess of 20					
102	84	202	42	Independent claims in excess of 3					
104	280	204	140	Multiple dependent claim, if not paid					
109	84	209	42	** Reissue independent claims over original patent					
110	18	210	9	** Reissue claims in excess of 20 and over original patent					
SUBTOTAL (2)				(\$ 0)					
*or number previously paid, if greater; For Reissues, see above									
*Reduced by Basic Filing Fee Paid									
SUBTOTAL (3) (\$ 400)									

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	CHEN WANG	Registration No. Attorney/Agent)	38,650	Telephone	302-892-7750
Signature					Date FEBRUARY 25, 2002

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